

**TP-1 Tobacco Products Tax Return**

Station no. 036

REV 3

E S ____/____/____

NS DP CA

Do not write above this line.

Step 1: Identify your business

1 Account ID: _____

5 For what month are you filing this return? ____/____/____
Month Year

2 License no. TP – _____

6 ☐ Check here if your address has changed.

3 Business name _____

7 Is this a final (you are no longer in business) return? ☐ yes ☐ no4 Business address _____
Number and street

City _____

State _____

ZIP _____

Step 2: Figure your cost-based tax (tobacco products *excluding* moist snuff)

8 Wholesale price of products you manufactured and then sold or otherwise disposed of during this month. 8 _____

9 Wholesale price of products you purchased and then sold or otherwise disposed of during this month. 9 _____

10 **Add Lines 8 and 9.** This is the total cost of cost-based tobacco products you sold or otherwise disposed of. 10 _____11 Wholesale price of products you sold in interstate commerce. **Attach Schedule TP-11.** 11 _____12 Wholesale price of products you sold to someone other than a retailer or consumer. **Attach Schedule TP-12.** 12 _____13 Wholesale price of products returned to you on which you paid us tobacco tax. **Attach Schedule TP-7.** 13 _____14 Other deduction for cost-based products (wholesale price). **Attach Schedule TP-13.** 14 _____15 **Add Lines 11, 12, 13, and 14.** This is your total cost-based products tax deduction. 15 _____16 **Subtract Line 15 from Line 10.** This is your cost-based products tax base. 16 _____17 **Multiply Line 16 by 36% (.36).** This is your total cost-based tax. 17 _____**Step 3: Figure your weight-based tax (moist snuff *only*)**

18 Ounces of moist snuff you manufactured and then sold or otherwise disposed of during this month. 18 _____

19 Ounces of moist snuff you purchased and then sold or otherwise disposed of during this month. 19 _____

20 **Add Lines 18 and 19.** This is the total ounces of moist snuff you sold or otherwise disposed of. 20 _____21 Ounces of moist snuff you sold in interstate commerce. **Attach Schedule TP-14.** 21 _____22 Ounces of moist snuff you sold to someone other than a retailer or consumer. **Attach Schedule TP-15.** 22 _____23 Ounces of moist snuff returned to you on which you paid us tobacco tax. **Attach Schedule TP-16.** 23 _____24 Other deduction for moist snuff (ounces). **Attach Schedule TP-17.** 24 _____25 **Add Lines 21, 22, 23, and 24.** This is your total weight-based products tax deduction. 25 _____26 **Subtract Line 25 from Line 20.** This is your weight-based products tax base. 26 _____27 **Multiply Line 26 by .30.** This is your total weight-based tax. 27 _____**Step 4: Figure your payment**28 **Add Lines 17 and 27.** This is your total tobacco products tax. 28 _____

29 Credit you wish to apply. 29 _____

30 **Subtract Line 29 from Line 28.** Make your check payable to "Illinois Department of Revenue." 30 _____**Step 5: Sign below**

Under penalties of perjury, I state that I have examined this return and, to the best of my knowledge, it is true, correct, and complete.

Taxpayer's signature_____
Title____/____/____
Date(____)____-____
Telephone (Include area code)_____
Preparer's signature____/____/____
Date(____)____-____
Telephone (Include area code)**Step 6: Mail your return and payment or webfile at tax.illinois.gov**

TP-1 (R-12/12)

This form is authorized as outlined by the Tobacco Products Tax Act of 1995. Disclosure of this information is REQUIRED. Failure to provide information could result in penalties.